

U.S. DEPARTMENT OF HOMELAND SECURITY U.S. COAST GUARD CG-5394 (Rev. 6-04)	CASHIER ACCOUNTABILITY REPORT		FOR PERIOD
CHECK APPROPRIATE BOX (X) <input type="checkbox"/> MONTHLY <input type="checkbox"/> VERIFICATION <input type="checkbox"/> TRANSFER <input type="checkbox"/> LIQUIDATION		UNIT OPFAC NUMBER UNIT NAME ADDRESS NUMBER OF DAYS UNDER WAY	CASHIER DESIGNATION
STATUS OF FUNDS	DOLLARS	CENTS	REMARKS
THIS VOUCHER UNPAID REIMBURSEMENT VOUCHER DATED <i>(IF MORE THAN ONE LIST UNDER REMARKS)</i> UNSCHEDULED SUBVOUCHERS INTERIM RECEIPTS FOR CASH CASH ON HAND ADVANCE ON REIMBURSEMENT CHECKS ON HAND RECEIPTS FOR ADVANCES TO ALTERNATIVES RECEIPTS FOR ADVANCES TO SUB-CASHIERS OTHER <i>(SPECIFY)</i> TOTAL ACCOUNTABILITY			
AUTHORIZED ACCOUNTABILITY (OF-211)			
DISBURSEMENT BREAKDOWN	NUMBER		
TYPES OF DISBURSEMENTS PURCHASES TRAVEL ADVANCES PERSONAL CHECKS CASHED REGULAR PAYROLL EMERGENCY PAYROLL PCS ADVANCES TOTAL			
LOST/UNACCOUNTED FOR FUNDS THIS MONTH			
REIMBURSEMENTS THIS MONTH (USE JULIAN DATES)			
DATE REQUESTED	DATE RECEIVED		
(MAY BE CONTINUED ON A SEPARATE SHEET) TOTAL			
ACCOUNTING DATA			
NUMBER OF REIMBURSEMENT CHECKS DESIRED _____ IN THE AMOUNTS OF _____			
COMMENTS:			
TYPED NAME, RANK OR GRADE, CASHIER		DATE	SIGNATURE
TYPED NAME, RANK OR GRADE, ACO		DATE	SIGNATURE
TYPED NAME, RANK OR GRADE, TITLE		DATE	SIGNATURE
VERIFICATION OF ACCOUNTABILITY			
We, the undersigned, at _____, on _____, counted the cash and verified the assets on hand, assets in transit, and transfer of accountability by examination of documents and records, and found the accountability to be as reported above.			
TYPED NAME, RANK OR GRADE, AND TITLE			SIGNATURE
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